


Vt. Hospitals FY 2017 Submitted Budgets

		Net Patient Revenue	Percent of Increase	
Budget 2016 Approved NPR		\$ 2,307,481,048		
Budget 2017 Submitted NPR		\$ 2,421,935,116		
NPR increase		\$ 114,454,068	4.96%	
Adjust NPR for physician spending in the community that is now accounted for in the hospital budgets		\$ 18,746,701		
2017 NPR real increase		\$ 95,707,367	4.15%	
Adjust NPR for 20% reduction in NPR overage as proposed by hospitals		\$ 3,158,316		
Final 2017 NPR real increase		\$ 92,549,051	4.01%	

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Hospital	2015 Actual	Approved 2016 Budget	Submitted 2017 Budget	Net Patient Rev Growth	Deduct NPR for Physician transfers or acquisitions	Adjusted Net Patient Rev Growth	Adjusted NPR % change B16 - B17	Submitted NPR % change B16-B17
Brattleboro Memorial Hospital	\$75,742,920	\$73,896,151	\$76,408,611	\$2,512,460	\$0	\$2,512,460	3.4%	3.4%
Central Vermont Medical Center	\$173,990,659	\$173,996,286	\$193,220,803	\$19,224,517	\$2,804,070	\$16,420,447	9.4%	11.0%
Copley Hospital	\$63,464,436	\$60,987,719	\$65,509,894	\$4,522,175	\$0	\$4,522,175	7.4%	7.4%
Gifford Medical Center	\$53,896,728	\$56,201,733	\$57,762,429	\$1,560,696	\$0	\$1,560,696	2.8%	2.8%
Grace Cottage Hospital	\$16,038,766	\$18,375,041	\$19,205,503	\$830,462	\$0	\$830,462	4.5%	4.5%
Mt. Ascutney Hospital & Health Center	\$45,514,515	\$48,060,871	\$47,744,700	-\$316,171	\$0	-\$316,171	-0.7%	-0.7%
North Country Hospital	\$73,297,094	\$76,604,320	\$81,189,662	\$4,585,342	\$0	\$4,585,342	6.0%	6.0%
Northeastern VT Regional Hospital	\$65,548,594	\$68,095,300	\$71,339,400	\$3,244,100	\$0	\$3,244,100	4.8%	4.8%
Northwestern Medical Center	\$97,798,763	\$95,697,390	\$102,867,018	\$7,169,628	\$3,080,325	\$4,089,303	4.3%	7.5%
Porter Medical Center	\$70,596,270	\$75,581,083	\$76,094,922	\$513,839	\$0	\$513,839	0.7%	0.7%
Rutland Regional Medical Center	\$228,328,637	\$233,248,162	\$243,415,448	\$10,167,286	\$2,372,983	\$7,794,303	3.3%	4.4%
Southwestern VT Medical Center	\$142,769,168	\$144,025,568	\$152,792,211	\$8,766,643	\$1,720,462	\$7,046,181	4.9%	6.1%
Springfield Hospital	\$55,926,090	\$55,936,500	\$59,147,241	\$3,210,741	\$0	\$3,210,741	5.7%	5.7%
University of Vermont Medical Ctr	\$1,115,357,666	\$1,126,774,924	\$1,175,237,274	\$48,462,350	\$8,768,861	\$39,693,489	3.5%	4.3%
Totals	\$2,278,270,306	\$2,307,481,048	\$2,421,935,116	\$114,454,068	\$18,746,701	\$95,707,367	4.15%	4.96%

Vt. Hospitals FY 2017 Submitted Budgets Rate Trends

Annual Rate Increase	2013	2014	2015	2016	2017	
	Approved	Approved	Approved	Approved	Submitted	If Approved as Proposed
Brattleboro Memorial Hospital	5.2%	5.8%	2.7%	-1.4%	3.5%	3.5%
Central Vermont Medical Center	5.0%	6.9%	5.9%	4.7%	3.0%	2.63%
Copley Hospital	3.0%	6.0%	0.0%	-4.0%	0.0%	0.0%
Gifford Medical Center	6.1%	7.6%	5.6%	5.8%	3.9%	3.9%
Grace Cottage Hospital	6.5%	6.0%	5.0%	5.0%	5.0%	5.0%
Mt. Ascutney Hospital & Health Ctr	7.0%	5.0%	3.2%	5.7%	4.9%	4.9%
North Country Hospital	4.6%	8.0%	8.3%	4.8%	3.5%	3.5%
Northeastern VT Regional Hospital	6.5%	5.6%	5.0%	5.2%	3.8%	3.8%
Northwestern Medical Center	2.9%	3.9%	6.4%	-8.0%	2.9%	1.52%
Porter Medical Center	5.0%	6.0%	5.0%	5.3%	3.7%	3.7%
Rutland Regional Medical Center	10.3%	4.8%	8.4%	3.7%	-5.1%	-5.1%
Southwestern VT Medical Center	6.8%	7.2%	4.5%	3.8%	3.9%	3.36%
Springfield Hospital	6.0%	4.6%	5.5%	2.8%	0.0%	0.0%
The University of Vermont Medical Center	9.4%	4.4%	7.8%	6.0%	3.0%	2.63%
Weighted Average All Hospitals	7.9%	5.2%	6.8%	4.4%	2.2%	1.9%

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Future improvements

- 1) “Rebasing” or other budget adjustment should require filing in the current operating year; not during the next annual budget review.
- 2) More defined methodology for budget adjustments should be determined by the Board:
 - a) What and how should new utilization be examined:
 - i. In-migration
 - ii. Expansion of coverage
 - iii. Service area growth
 - iv. Other
 - b) What should be the variable cost factor related to new utilization?
 - c) How do we handle other budget adjustments such as payer reimbursement changes?
 - d) What will the process be for examining a budget adjustment?
- 3) Increase monitoring of payer revenues more closely during the current year.
- 4) Budget performance reviews – establish evaluation metrics; process.
- 5) Review whether we want to require hospitals file three year financial plans.
- 6) Information and report development for ACO; all payer changes.